



MANUAL HANDLING GUIDANCE

The phrase 'manual handling' does not accurately capture many of the routine physical activities within a GP or Dental Practice. It perhaps conjures up images of 'man-handling' patients or very heavy items which are limited within primary care.

This guidance is to help you comply with the health & Safety legislation but, **more importantly**, to reduce the risk of what can at first appear to be very innocuous working positions / activities. For example Dentists and Dental Nurses will be only too familiar with the discomfort of holding a difficult bent posture whilst undertaking lengthy treatments; Receptionist and Admin staff will recognise awkward storage areas. Many Practices were not originally designed to accommodate clinical and administrative activities.

We have had to include a reasonable amount of detail in this guidance even though the relative risks in Practices are low. Please do not let this put you off. The process of managing manual handling risks is **straightforward** and if you apply good old common sense the resultant risk assessments will be perfectly adequate.

Please do not hesitate to contact the OH team if you would like further advice on this guidance or specific advice regarding an individual or activity.

Manual Handling Guidance

The (Manual Handling Operations 1992) requires **all** employers to:

1. "Avoid hazardous manual handling operations so far as is reasonably practicable,
2. Assess any hazardous manual handling operations that cannot be avoided, and
3. Reduce the risk of injury as far as is reasonably practicable" - This means weighing up the risk of injury against the cost or effort required to introduce new measures.

Manual handling is considered to be any activity that involves either the transporting or supporting of a load, by human effort, which includes activities such as; lifting, lowering, pushing, pulling, carrying or moving, and this applies to handling objects such as patient records, equipment and boxes and/or patients themselves.

The overall risk from manual handling activities within General / Dental Practice is likely to be low. Nevertheless (in nutshell) you are legally required to:-

- assess the risks to your staff,
- eliminate them or substitute them with less hazardous activities
- put in place procedures to control the remaining risk (including written safe systems of work where appropriate)
- inform and instruct your employees regarding the risks and control procedures and provide manual handling training.



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- document the assessment and the arrangements put in place
- review regularly (we suggest annually) unless something changes in the interim.

This does not mean you have to produce a written risk assessment for every single manual handling activity carried out within your work place. Generic risk assessments are quite acceptable as long as they consider all the types of manual handling activities undertaken, and the specific needs of individual staff.

Employees also have responsibilities which include:

1. Following the safe systems of work which are provided by the employer,
2. Making proper use of any equipment provided for their safety,
3. Co-operating with the employer on Health and Safety matters, i.e. training,
4. Informing the employer of any hazardous manual handling activities, and
5. Taking care to ensure their activities do not put anyone else at risk.

Assessing the risk

Ideally risk assessments should be carried out by the staff doing the activity, as long as they feel competent. Don't assume that it is only the Practice Manager who should do these assessments. Remember that everyone has a responsibility for health and safety and a duty of care to ensure that we are safeguarding ourselves as well as colleagues and those visiting the premises.

Getting Started - Ask the following questions:

1. Do the activities my staff undertake involve a significant risk of injury?
2. Can these activities be avoided / mechanised / automated at a reasonable cost?
3. Are the activities well within the guidelines for lifting and handling (see below)

Other factors to consider when thinking about this are:

4. What do your accident records indicate i.e. any trends / common themes?
5. Is there a concern about sickness absence levels in relation to one group of workers, or a specific employee, due to musculoskeletal complaints / injury associated with Manual Handling?
6. Have your staff ever been trained in Manual Handling?

The HSE provide a '**Risk Assessment filter tool**' to consider those activities which you consider 'low risk' (see page 6) If, by using the filter, the risk from the activity falls within the guidelines (see page 4 & 5), you do not normally have to progress into more

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detailed risk assessment **unless** you have individual employees who may be at increased risk, e.g. pregnant workers, young workers or those with health issues. If you are in any doubt as to whether there is *significant risk* involved in any activity, always complete a detailed risk assessment.

Please note that the filter tool is **not** considered to be useful if there are significant risks from the manual handling activities **or** the activities are complex.

A Formal Risk Assessment – see template 2 (pages 7 - 12)

As well as considering the questions raised in the previous paragraphs, when doing your formal risk assessment the regulations require you to consider the following in more detail:

- The task i.e. what needs to be done,
- The individual i.e. size, any known health concerns,
- The environment i.e. size of room, temperature, awkward spaces,
- The load i.e. predictable item such as a box, or unpredictable i.e. a patient,
- Other factors i.e. the use of protective clothing.

You should also remember that the risk assessment is not the end of the process. It is just a method of analysing the risks in order that practical solutions can be considered and implemented. Ultimately, this is the responsibility of the employer i.e. the GP / Dentist who should ensure that any necessary corrective action is investigated, approved and applied. The HSE use the slogan – **“Take Action... and Check it has the Desired Effect.”**

Summary - **Remember,**

- You only need to formally document the manual handling activities that present a significant risk to the health of the staff,
- To date the assessment and to set a date to review any outstanding actions,
- If no corrective actions are necessary, you should review the assessment at least annually or when there is a significant change to the activity i.e. new equipment, following an accident or if individuals are reporting ill health effects,
- To keep these documents, they will provide you with proof that you are complying with the law!

Further Reading Material / Information

Manual Handling Operations Regulations 1992 (as amended 2002)	HSE
Getting to Grips with Manual Handling – A short guide	HSE

A free guide “Getting to Grips with Manual Handling” is available from www.hse.gov.uk.



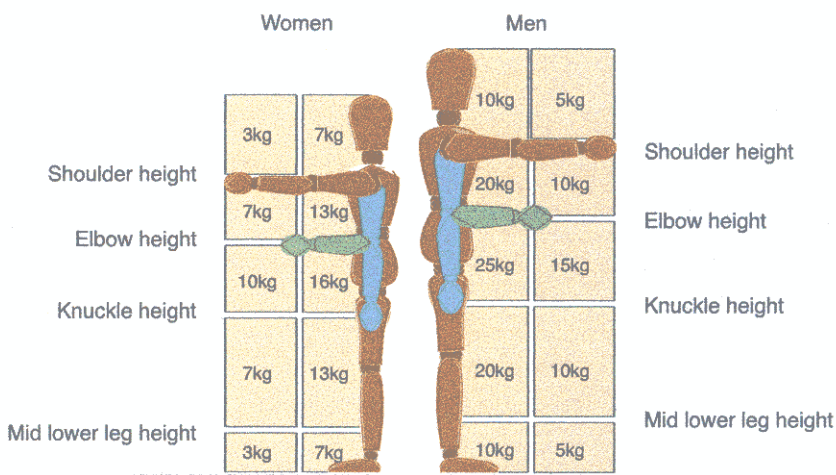
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A Preliminary Check – The Risk Assessment Filter

Guidance notes – Use the following HSE template to determine if a more detailed assessment is required. Complete the questionnaire on page 8 and keep this either as evidence that no further action was required **OR** as evidence towards your full risk assessment.

Remember working within the following guidelines will cut the risk of injury and reduce the need for a more detailed assessment. However, these **are not** considered to be safe or approved figures for manual handling activities.

The following guidelines / notes have been taken from “The Health and Safety (Manual Handling Operations) Regulations 1992 (as amended in 2002)”.



Lifting & Lowering

- Each box contains a guideline weight for lifting and lowering in that zone. The weights are reduced if handling is done with the arms extended, or at high / low levels, as that is where injuries are most likely to occur.
- By observing the activity, decide which box / boxes the individuals hands pass through when moving a load, and the maximum weight of the load. If less than the figure given in the box, the operation is within the guidelines.
- If an individual's hands enter more than one box during the operation, use the smallest weight. Use an in-between weight if the hands are close to a boundary between boxes.



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- The guideline weights assume that the load is readily grasped with both hands and that the activity takes place in reasonable working conditions, with the lifter in a stable body position.

Twisting – reduce the guideline weights if the handler twists to the side during the activity. As a rough guide, reduce them by 10% if the handler twists beyond 45° and by 20% if the handler twists beyond 90°.

Carrying – the same guidance applies for lifting and lowering where the load is –

- Held against the body
- Carried no further than about 10m without resting

Frequent lifting and lowering – The guideline weights are for relatively infrequent operations – up to 30 activities per hour or one lift every two minutes, where the pace of work is not forced, adequate pauses to rest or use of different muscles are possible and the load is not supported by the handler for any length of time. These figures must be reduced if the activity is repeated more often. As a rough guide:

Where activities are repeated	Figures should be reduced by
Once or twice per minute	30%
Five to eight times per minute	50%
More than 12 times per minute	80%

Pushing and Pulling – the task is within the guidelines if the following figures are not exceeded and the distance involved is no more than 20m.

	Men	Women
Force to stop or start the load	20kg	15kg
Sustained force to keep the load in motion	10kg	7kg

Handling while seated – These only apply when an individual is seated in an upright position, with the hands / arms held close to the body.

Men	Women
5kg	3kg

If this process takes more than a few minutes, then you should be doing a full risk assessment.



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Risk Assessment Filter

Task:

Activity	For each activity, does the task fall outside the guidelines? Yes / No	Are there any other considerations which indicate a problem? Yes / No (indicate what the problem is, if desired.)	Is a more detailed assessment required? Yes / No
Lifting and lowering			
Carrying			
Pushing and pulling			
Handling while seated			

Date: -..... **Signature:** -

Name and designation: -

.....



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Manual Handling Risk Assessment

Description of the activity including load weight, frequency of lift and carrying distances (if applicable): -	Name of Practice: - Location of assessment i.e. room identity: -
Personnel Involved: -	Name & signature of Assessor: - Date of Assessment: -

Overall assessment of the risk of injury? (to be completed at the end of the assessment)		
Low	Medium	High
Name and signature of Manager: Date provided to Manager for consideration: -		



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Remedial action to be taken, in order of priority:	Person responsible for implementing controls:	Target implementation date:	Completed: - Yes / No
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

Date by which all actions should be completed: -

Assessment review date: -

Manager's name and signature: -



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Consider	If yes, tick level of risk			Problems occurring from the tasks (make notes in this column in preparation for possible remedial action)	Possible remedial action, e.g. changes that need to be made, and who needs to be involved.
	Low	Medium	High		
The task – do they involve?					
Holding loads away from the trunk?					
Twisting?					
Stooping?					
Reaching upwards?					
Excessive lifting or lowering distances?					
Excessive carrying distances?					
Strenuous pushing or pulling?					
Frequent or prolonged physical effort					
Unpredictable movement of loads?					
Repetitive handling?					
Insufficient rest or recovery?					
A work rate imposed by process?					



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Consider	If yes, tick level of risk Low / Medium / High			Problems occurring from the tasks (make notes in this column in preparation for possible remedial action)	Possible remedial action, e.g. changes that need to be made, and who needs to be involved.
The Load – are they?					
Heavy?					
Bulky / unwieldy?					
Difficult to grasp?					
Unstable / unpredictable?					
Sharp / hot / potentially damaging?					
The working environment – are there?					
Constraints on posture?					
Uneven, slippery or unstable surfaces / floors?					
Variation in levels?					
Hot /cold / humid conditions?					
Strong air movements?					
Poor lighting conditions?					



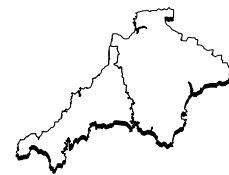
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Consider	If yes, tick level of risk Low Medium High			Problems occurring from the tasks (make notes in this column in preparation for possible remedial action)	Possible remedial action, e.g. changes that need to be made, and who needs to be involved.
Individual capability – does the job?					
Require unusual physical capability i.e. height / strength?					
Present a risk to those with a health problem or a physical or learning difficulty?					
Present a risk to those who are pregnant?					
Require special training / information?					
Other Factors to consider					
<i>Personal Protective Equipment / clothing (PPE)</i>	Yes No				
Is movement or posture hindered by clothing or personal protective equipment?					
Is there an absence of the correct / suitable PPE being worn?					



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<i>Work organisation</i>	YES	NO	Problems occurring from the tasks (make notes in this column in preparation for possible remedial action)	Possible remedial action, e.g. changes that need to be made, and who needs to be involved.
Do workers feel that there has been a lack of consideration given to the planning and scheduling of tasks / rest breaks?				
Do workers feel that there is poor communication between managers and employees (e.g. not involved in risk assessments or decisions on changes in workstation design)				
Are there sudden changes in workload, or seasonal changes in volume without mechanisms for dealing with the change?				
Do workers feel they have not been given enough training and information to carry out the task successfully?				



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General Guidance on the Movement of Loads

The aim of this guidance is to provide staff with information to help them reduce the risk of injury related to the manual handling of loads / patients. In general terms;

- Staff should receive some guidance on manual handling during induction training and at regular intervals during their employment. Staff training records should be kept within the individuals personnel file.

Staff should:

- Plan the tasks prior to implementation to ensure that potential effects of hazards are identified e.g. use equipment or get additional help.
- Ensure the load is as safe as possible for moving i.e. decant a large load into a smaller load, make sure waste bags are not more than 2/3 full.
- Always report accidents associated with manual handling immediately.
- Report any personal difficulties associated with manual handling activities to the Practice Manager, or other nominated person.

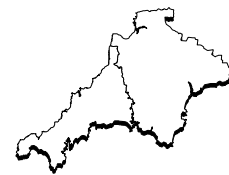
The following principles of safer handling should be followed at all times.

Safer lifting and lowering

- Ensure a secure and comfortable grip of the load.
- Ensure a wide and stable foot position as close to the load as possible.
- Ensure leading foot is in line with the direction of travel to avoid twisting.
- Lift the load between the knees if it is placed at a low level, bending the knees instead of the back.
- Keep a naturally upright position whenever possible.
- Avoid twisting, bending and reaching or jerky movements.
- Look in the direction of travel to avoid neck twisting.
- Keep the load close to the body, with elbows tucked in.
- Use momentum to reduce strain, and use the weight of the body to help move the load.
- Stand close to the setting down area.
- Use knees to lower the load instead of bending the back.
- Lower the load near the edge e.g. of a shelf and slide into position.

Safer Carrying

- Keep the load close to the body.
- Ensure that the handler can see where they are going.
- Plan rest pauses or use a trolley to prevent carrying for too long.
- Do not twist – move the feet instead of twisting the back.



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Safer pushing and pulling

- Ensure the handler can see where they are going.
- Keep elbows close beside the body wherever possible.
- Use leg muscles and momentum to move the load, not the back.

Repetitive handling or static posture

Whenever possible work activities should be planned to reduce repetitions, e.g. by spreading the activity through the day; sharing the tasks between a larger group of individuals; planning task rotation for individuals to reduce the effects of repetitions; or using equipment etc.

Collapsing or collapsed persons

- Unless trained recently in patient handling techniques, staff **must not** physically assist a collapsing person nor support the weight of a collapsing person. Obstacles likely to cause injury should be removed from the immediate area if possible, and assistance obtained.
- If someone has collapsed, summon help and administer appropriate first aid.
- Manual lifting of a person should be avoided whenever possible, except in unforeseeable emergency situations i.e. a fire, flood etc. A "team lift" may need to be considered, but this should be done with caution and following a risk assessment.
- Manually supporting a patient's weight while attempting to undertake another task i.e. adjust clothing, leg dressings etc, is unacceptable. Specialised equipment is available to assist staff in these activities (further information is available from the Occupational Health Service)